Under the Paperwork Reduction Act of 1995, no persons are required to respond to a concentration PATENT APPLICATION FEE DETERMINATION RESubstitute for Form PTO-875							mation unles	pe; U.S. DEPARTMENT OF COMMERCE as it displays a valid OMB control number.  Application or Docket Number		
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL EN	ITITY /	OR		R THAN ENTITY
				R EXTRA	RATE	F <b>5</b> €		RATE	FEE	
	ASIC FEE 77 CFR 1.16(a))				s_	OR		s		
	OTAL CLAIMS 37 CFR 1.16(c)) 30 minus 20 = •			x s=	/	OR	x_s=			
	NDEPENDENT CLAIMS are minus 3 = *			x s		OR	× s=			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+ \$=		OR	+ \$=		
* If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	TØTAL	
		AIMS AS AME				/		-		
		AINO AO AINI	LNDLD		(0.1 0)			OR		R THAN
_	5/ /	(Column 1) CLAIMS	1	(Column 2) HIGHEST	(Column 3)	SMALL EN	1	1		ENTITY /
Y L	8/14/06	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDY TIONAL PEE		RATE	ADOI- TIONAL FEE
	Total (37 CFR 1.16(c))	20	Minus	30	= 0	x s=		OR	x s=	<u>/</u>
MENDMENT	Independent (37 CFR 1.16(b))	. /	Minus	<u>"3</u>	<b>-</b> Ø	× s=/		OR	× s=/	[
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$=		OR	+ \$=		
						TOTAL ADD'L FEE		OR	TOTAL ADO'L FEE	
		(Column 1)		(Column 2)	(Column 3)			_		
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total (37 CFR 1.16(c))	*	Minus	**	=	× \$=		OR	x s=	
AMENDMENT	Independent (37 CFR 1.16(b))	*	Minus	***	=	× \$=		OR	x s=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$=		OR	+ s=	
						TOTAL ADD'L FEE	-	OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)			,		
NTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Z	Total (37 CFR 1.16(c))	*	Minus	**	=	x s=		OR	x s=	
DMEN		*	Minus	***	=	x \$=		OR	x s=	·
ENDMEN	Independent (37 CFR 1.16(b))		1					•		
AMENDMENT	(37 CFR 1.16(b))	ATION OF MULTIPL	E DEPENDI	ENT CLAIM (37 CF	R 1.16(d))	+ \$=		OR	+ \$ =	

\*\*\* If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.